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DECLARATION AND POWER OF ATTORNEY FOR PATENT

DOCKET NO. TS01-1094

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Method Of A Floating Pattern Loading System In Mask Dry-Etching Critical Dimension Control

the specification of which (check one)

☒ X is attached hereto.

was filed on _____

Application Serial No. _____

and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Priority Claimed:

_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)

_____	_____	_____
(Number)	(Country)	(Day/Month/Year Filed)

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name & registration no.)

GEORGE O. SAILE. (Reg. No. 19,572), STEPHEN B. ACKERMAN (Reg. No. 37,761)

Send Correspondence to: 28 DAVIS AVENUE, POUGHKEEPSIE, NEW YORK 12603

Direct telephone Calls to: (name & telephone number) GEORGE O. SAILE NEW YORK 845 452 5863

FEI-GWO TSAI

Full name of sole or first inventor

FEI-GWO TSAI

Inventor's signature

Residence

20th-5, No. 19, 370 Alley, Park S. Rd, Tainan, Taiwan

Residence

Taiwan, R.O.C. Republic of China

Citizenship

No. 8, Li-Hsin Rd. 6, Science Based Industrial Park, Hsin-Chu, Taiwan 300-77, Taiwan, Republic of China

Post Office Address



Date

2003/11/11 November 1, 2003

WEI-ZEN CHOU

Full name of second inventor

Date

Wei-Zen Chou11/01/03

Inventor's signature

11th. No. 24-2, Lane 217, Anle Rd., Tangle City, Taipei Taiwan

Residence

Taiwan, R.O.C, Republic of China

Citizenship

No. 8, Li-Hsin Rd. 6, Science Based Industrial Park, Hsin-Chu, Taiwan 300-77, Taiwan, Republic of China

Post Office Address

ZONG-XIAN TSAI

Full name of third inventor

Date

ZONG-XIAN TSAI11/01/03

Inventor's signature

3F No. 124, S. Ming Rd., Taiwan, Taiwan.

Residence

Taiwan, ROC, Republic of China

Citizenship

No. 8, Li-Hsin Rd. 6, Science Based Industrial Park, Hsin-Chu, Taiwan 300-77, Taiwan, Republic of China

Post Office Address

Full name of fourth inventor

Date

Inventor's signature

Residence

Citizenship

Post Office Address

Full name of fifth inventor

Date

Inventor's signature

Residence

Citizenship

Post Office Address

Full name of sixth inventor

Date

Inventor's signature

Residence

Citizenship

Post Office Address

